BEST AVAILABLE COPY

| PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number | | | | | | | | | | | | | |
|--|--|------------|--------------------------------|--|---|-----------------------|----------|-----------------|--|----------|---------------------|------------------------|--|
| Effective November 10, 1998 09/213806 | | | | | | | | | | | | | |
| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | | SMALL ENTITY | | | OTHER THAN | | |
| FOR | | | | R FILED | | NUMBER EXTRA | | | FEE | 7 | RATE | FEE | |
| BASIC FEE | | | | | | er en verege er en eg | | | 380.00 | OR | | 760.00 | |
| TOTAL CLAIMS | | | .5 | 7 minus | 20= - 3/ | = - 37 | | \$ 9= | | OR | X\$18= | 106 | |
| INDEPENDENT CLAIMS | | | ر | g minus | 3 = * | | | 39= | 1 | OR | X78= | | |
| MŁ | ILTIPLE DEPEN | DENT (| CLAIM P | RESENT | 1 | | | 130= | | | +260= | | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | <u> </u> | OTAL. | | OR OR | TOTAL | 142/0 | |
| CLAIMS AS AMENDED - PART II | | | | | | | | J171L | <u> </u> | 104 | OTHER | THAN | |
| | (Column 1) (Column 2) (Column 1) (Column 2) (Column 3) | | | | | | SA | ALL | ENTITY | OR | SMALL | | |
| AMENDMENT A | | REM/ AF | aims Aining Ter Dment | | NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | R | ATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | * [| 17 | Minus | - 57 | = Ø | × | \$ 9= | | OR | X\$18= | ١ | |
| | Independent | * | 3 | Minus | 444 3 | -0 | Х | 39= | | OR | X78= | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | +1 | 30= | | OR | +260= | | |
| | | | | | | | | TOTAL T. FEE | | ОЯ | TOTAL ADDIT, FEE | | |
| - | (Column 1) (Column 2) (Column 3) | | | | | | | | | | | | |
| AMENDMENT B | | REM/ AF | AIMS AINING TER DMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | R | ATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | * | | Minus | ** | = | X | 9= | | OR | X\$18= | | |
| | Independent | * | NOEM | Minus | *** | | X | 39= | | OR | X78= | | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | 30≈ rotal | | OR | +260= | | |
| | | | | | | | | | | OR | TOTAL ADDIT. FEE | | |
| _ | | | imn 1) NMS | I A STATE OF THE S | (Column 2) | (Column 3) | | | | | | | |
| AMENDMENT C | | REM/ | AINING TER DMENT | | NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | R/ | NTE. | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | ± | · | Minus | ** | = | XS | 9= | | OR | X\$18= | | |
| | Independent + | | | Minus | *** | = | X3 | 9= | | OR | X78≃ | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | | | +260= | ; | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. **Total | | | | | | | | | | OR [| TOTAL | | |
| -4+1 | ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ADDIT. FE | | | | | | | | | | | | |